

# CALIFORNIA HAZARDOUS WASTE MANIFEST

See reverse side for Instructions.  
Please type or print clearly. Press Hard.

State Department of Health Services  
HAZARDOUS MATERIALS MANAGEMENT SECTION  
744 P Street, Sacramento, CA 95814

① Manifest Number **015-001839**

## GENERATOR (Generator Must Complete)

③ Designated TSD Facility (Authorized to operate under an approved state program or federal program)

④ Alternate TSD Facility

SFUND RECORDS CTR  
999000315

② Name ALUMINUM CO OF AMERICA OPERATING IND  
EPA NO. CAD0074126681 EPA NO. CA0080012024  
Address 5151 ALCOA AVE Phone No. 566W4 Address 900 POTERO GRANDE  
City, State, Zip KERNON 90058 City, State, Zip MONTROSE PARK

Name RETURN  
EPA NO.                       
Address                       
City, State, Zip                     

⑤ U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE				
WASTE				

CONTAINERS NUMBER:                       
TYPE: ☐ DRUMS ☐ BAGS ☐ CARTONS  
☒ TANK TRUCK ☐ DUMP TRUCK  
☐ OTHER

⑥ WASTE CATEGORY #7

⑦ EX. HAZ. WASTE PERMIT NO.                     

⑧ GENERATING PROCESS FABRICATOR

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
⑨ A. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.	E. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.
B. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.	F. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.
C. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.	G. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.
D. <u>                    </u>			<input type="checkbox"/> % <input type="checkbox"/> ppm.				

⑩ WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

⑪ PHYSICAL STATE: ☐ Solid ☒ Liquid ☒ Sludge ☐ Slurry ☐ Gas ☒ Other ALUMINUM OXIDES, WATER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☐ Gloves ☐ Goggles ☐ Respirator ☐ Other                     

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

⑬ K. Samp Signature of Authorized Agent and Title 2-13-81 Date Shipped

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME ASBURY OIL CO.  
EPA NO. CAD028277036  
ADDRESS 13419 Halldale Avenue PHONE NO. (213) 321-1392  
CITY, STATE, ZIP Gardena, California 90249

⑮ PICK-UP DATE 2-13-81  
TIME 1130 AM ☐ PM  
2-13-81 Date

⑯ Joh 2 min Signature of Authorized Agent and Title

## TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

⑰ NAME OPERATING IND Inc 18 QUANTITY (If Measured) 100  
EPA NO. CA0080012024 19 STATE FEE (If Any)                       
PHONE NO.                     

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:                     

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:                     

㉒ NAME                       
EPA NO.                     

㉑ HANDLING OR DISPOSAL METHOD:  
☐ Surface Impoundment ☒ Landfill  
☐ Injection Well ☐ Land Treatment  
☐ Treatment (Specify)                       
☐ Recovery or Reuse ☐ Storage/Transfer

K001244  
O. Hancock Signature of Authorized Agent and Title 2-13-81 Date Accepted